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EXERCISE PROGRAMME FOR WOMEN AFTER BREAST CANCER SURGERY: A RANDOMISED CONTROLLED TRIAL

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Purpose: Exercise has been identified as a wellbeing and quality of life promoting factor, amongst women after breast cancer surgery. Physical activity levels reduce significantly for many women after a diagnosis of breast cancer and remain low after treatment is completed. The aim of this study is to determine whether a supervised group exercise program, in conjunction with standard treatment, is more effective in reducing body mass index, improving physical activity levels and promoting quality of life, than standard treatment on its own, in women after breast cancer surgery.

Relevance: Breast cancer is the most commonly occurring cancer among women in Europe. Early detection and improved treatments have resulted in increased survival rates. Treatments for cancer can result in significant reductions in many different quality of life outcomes. Exercise has been suggested to improve a broad range of quality of life problems after the diagnosis of breast cancer, such as fatigue, functional capacity and weight gain. Physical therapists working with these women should promote physical activity and create strategies to promote an active lifestyle among them.

Participants: 42 women, submitted to breast cancer surgery in the Hospital Fernando Fonseca, Amadora, and submitted to physical therapy intervention as outpatients, completed the inclusion criteria. They were randomly allocated into intervention group (n=21) or control group (n=21). The telephone contact was done by an external element, blind to the study. Some elements declined or could not participate. The final intervention group was n=11 and the control n=10, similar in age and BMI.

Methods: A randomized controlled trial was carried out with the following outcomes: quality of life, using the European Organization for Research and Treatment of Cancer Quality of Life Questionnaire (EORTC QLQ-C30) and Supplementary Questionnaire Breast Cancer Module (QLQ-BR23), the body mass index and the physical activity index with the International Physical Activity Questionnaire (IPAQ).

Analysis: Data was analysed using inferential statistics. Although some of the measures are ordinal, it was decided to use a less conservative approach and a t-test for independent variables was used. For some variables, Mann-Whitney was also used.

Results: Although there were differences between the groups, they were not significant for most outcomes used. The most expected significant difference did not occur – reduction in body mass index.

Conclusions: The positive results obtained in the quality of life outcomes and in physical activity index were not obtained for the body mass index. There is the need for future research, with larger samples, other variables such as nutrition being monitored, and long term effects evaluated.

Implications: This study brings in a significant contribution for the development of health promotion services provided by physical therapists to breast cancer survivors. It involves innovative ways of supporting their independent and reflective practice and collaborating effectively with other professionals.

Key-words: 1. Breast cancer 2. physical therapy 3. health promotion

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Ethics approval: The Clinic and the Rehabilitation Service Direction of Hospital Fernando Fonseca, Amadora, approved this study. Ethics approval was not required.

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